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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	7	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Lesa	
	your government-issued picture identification (for	First name	First name
	example, your driver's	F.	
	license or passport).	Middle name	Middle name
	Bring your picture	Williams	
	identification to your meetin with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal	xxx-xx-2294	
	Individual Taxpayer Identification number (ITIN)		

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De	btor 1 Williams, Lesa F.		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1814 N Lotus Ave Apt 2 Chicago, IL 60639-4231				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook	County			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
thi	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
						

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Deb	tor 1	Williams, Lesa F.				_	Case number (if known)		
				•					
Par	2:	Tell the Court About Y	our Bankr	uptcy Ca	se				
7. ,	Bank	chapter of the ruptcy Code you are sing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	CHOO	sing to file under	Chapt	er 7					
			☐ Chapt	er 11					
			☐ Chapt	er 12					
			☐ Chapt	er 13					
8.	How	you will pay the fee	abo If yo pre-	ut how you our attorned printed ad	u may pay. Typically, if you are by is submitting your payment or dress.	paying the fee you n your behalf, you	ck with the clerk's office in your local court for rurself, you may pay with cash, cashier's check, ar attorney may pay with a credit card or check was a second to the country of the cou	or money order. with a	
					r the fee in installments. If you nstallments (Official Form 103A		ion, sign and attach the Application for Individua	als to Pay The	
			☐ I re not you	quest tha required to r family size	t my fee be waived (You may o, waive your fee, and may do s ze and you are unable to pay the	request this option only if your income fee in installmer	on only if you are filing for Chapter 7. By law, a jome is less than 150% of the official poverty line onts). If you choose this option, you must fill out t	that applies to	
			to F	lave the C	Chapter 7 Filing Fee Waived (O	fficial Form 103B	3) and file it with your petition.		
9.		you filed for ruptcy within the last	■ No.						
	o y co	1131	LITES.	District		When	Case number		
				District	***	When	Case number		
				District		When	Case number		
	A								
	pend a spo this o a bus	ny bankruptcy cases ing or being filed by buse who is not filing case with you, or by filiate?	■ No □ Yes.						
				Debtor			Relationship to you		
				District		When	Case number, if known		
				Debtor			Relationship to you		
				District		_ When	Case number, if known		
11.		ou rent your	■ No.	Go to I	ine 12.				
	resid	ence?	☐ Yes.	Has yo	our landlord obtained an eviction	judgment agains	st you and do you want to stay in your residence	?	
					No. Go to line 12.				
					Yes. Fill out Initial Statement A	About an Eviction	Judgment Against You (Form 101A) and file i	t with this	

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Deb	tor 1 Williams, Lesa F.				Case number (if known)	
Par	Report About Any Bu	sinesses \	ou Own	as a Sole Proprieto	r	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	ness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Stat	e & ZIP Code	
	to this petition.		Chec	k the appropriate box	to describe your business:	
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operations	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 1116(1)(B).			
	For a definition of small	■ No.	l am r	ot filing under Chap	ter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	l am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	l am t	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.		•		
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?		
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	

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Debtor 1 Williams, Lesa F. Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, and I received a counseling. this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, receive a briefing about if any, that you developed with the agency. that you developed with the agency. credit counseling before you file for bankruptcy. You must truthfully check one of I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed the following choices. If you filed this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a certificate cannot do so, you are not certificate of completion. of completion. eligible to file. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you If you file anyway, the court you MUST file a copy of the certificate and payment MUST file a copy of the certificate and payment plan, if any. can dismiss your case, you plan, if any. will lose whatever filing fee you paid, and your creditors I certify that I asked for credit counseling I certify that I asked for credit counseling services can begin collection from an approved agency, but was unable to obtain services from an approved agency, but was activities again. unable to obtain those services during the 7 those services during the 7 days after I made my days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made to requirement, attach a separate sheet explaining what obtain the briefing, why you were unable to obtain it before efforts you made to obtain the briefing, why you were you filed for bankruptcy, and what exigent circumstances unable to obtain it before you filed for bankruptcy, and required you to file this case. what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied with case. your reasons for not receiving a briefing before you filed for Your case may be dismissed if the court is bankruptcy dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must file If the court is satisfied with your reasons, you must a certificate from the approved agency, along with a copy of still receive a briefing within 30 days after you file. the payment plan you developed, if any. If you do not do so, You must file a certificate from the approved agency your case may be dismissed. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. ☐ I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or making makes me incapable of realizing or making rational rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be unable My physical disability causes me to be unable to to participate in a briefing in person, by phone, participate in a briefing in person, by phone, or through or through the internet, even after I reasonably the internet, even after I reasonably tried to do so. tried to do so. Active duty. Active duty. I am currently on active military duty in a military I am currently on active military duty in a military combat zone. combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about about credit counseling, you must file a motion for credit counseling, you must file a motion for waiver of credit

waiver credit counseling with the court.

counseling with the court.

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Deb	tor 1 Williams, Lesa F.			Case nun	nber (if known)			
Part	6: Answer These Question	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.			s debts? Business debts are debts that you incurred to obtain money ugh the operation of the business or investment.			
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe tha	t are not consumer debts or busine	ss debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you paid that funds will be available to d		perty is excluded and administrative expenses are			
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 5001-10,000	□ 50,001-100,000 □ 10,000			
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	\$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
	DA MOLIUIT		001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		\$500,0	001 - \$1 million	ш \$100,000,001 - \$300 minon	E Word than 400 billion			
20.		□ \$0 - \$5		■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ More than \$50 billion			
				\$100,000,001 - \$300 Hallon	·			
Par	7: Sign Below							
For	you	I have exa	amined this petition, and I declare ur	nder penalty of perjury that the inform	mation provided is true and correct.			
		If I have of States Co	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
	EX	Lundersta case dan	and making a false statement, conce result in fines up to \$250,000, or im	ealing property, or obtaining money opinionment for up to 20 years, or bo	or property by fraud in connection with a bankruptcy oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
			Williams e of Debtor 1	Signature of De	ebtor 2			
		Executed	on July 12, 2016 MM / DD / YYYY	Executed on -	MM / DD / YYYY			

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Debtor 1 Williams, Lesa F.		Case	Case number (if known)			
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United States	Code, and have explained t	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the be required by 11 U.S.C. § 342(b) and, in a case in			
If you are not represented by an attorney, you do not need to file this page.			y that the information in the schedules filed with the			
	/s/ Michael R. Richmond	Date	July 12, 2016			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Michael R. Richmond					
	Printed name					
•	Heller & Richmond, Ltd.					
	Firm name					
	33 N Dearborn St Ste 1907					
	Chicago, IL 60602-3828					
	Number, Street, City, State & ZIP Code					
	Contact phone (312) 781-6700	Email address	mrichmond@hellerrichmond.com			
	3124632					
	Bar number & State		_			

Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29 Desc Main Page 8 of 58 Document Fill in this information to identify your case and this filing: Debtor 1 Lesa F. Williams Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 1.1 Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: 1814 N Lotus Ave Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative Manufactured or mobile home Current value of the Current value of the Chicago IL 60639-4231 Land entire property? portion you own? \$0.00 City State ZIP Code Investment property \$70,000.00 Timeshare Describe the nature of your ownership interest Other

Who has an interest in the property? Check one

At least one of the debtors and another

Other information you wish to add about this item, such as local

Debtor 1 and Debtor 2 only

property identification number: improved real estate

Debtor 1 only Debtor 2 only (such as fee simple, tenancy by the entireties, or

Check if this is community property

a life estate), if known.

(see instructions)

Fee Simple

Official Form 106A/B Schedule A/B: Property page 1

County

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Debt	or 1	Williams, Le	sa F.			Case	number (if known)	
1.2	If yo	u own or have	more	than one, list h		t is the property? Check all that apply		
-		Biltmore Dr address, if available, o	r other de	scription		Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
-	Bart l City	lett	IL State	60103-2326 ZIP Code	 	Land Investment property Timeshare	Current value of the entire property? \$260,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Fee Simple	Current value of the portion you own? \$0.00 our ownership interest ancy by the entireties, or
-	County	,				202101 1 4114 202101 2 0111)	Check if this is com (see instructions)	nmunity property
1.3	If you own or have more than one, list have Too N Mayfield Ave Street address, if available, or other description					• •	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
-	Chic City	ago	IL State	60644-1027 ZIP Code		Investment property	Current value of the entire property? \$175,000.00	Current value of the portion you own?
					Who	has an interest in the property? Check one Debtor 1 only	Describe the nature of y (such as fee simple, ten a life estate), if known. Fee Simple	our ownership interest ancy by the entireties, or
-	County	,			□ □ Othe	Debtor 1 and Debtor 2 only	Check if this is com (see instructions)	nmunity property
					imp	roved real estate		
2. A	Add th	ne dollar value of	f the po	rtion you own for	all of y	our entries from Part 1, including any en	tries for pages	40.55

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

you have attached for Part 1. Write that number here.....=>

\$0.00

Official Form 106A/B Schedule A/B: Property page 2

Part 2: Describe Your Vehicles

Deb	tor 1 <u>V</u>	Villiams, Lesa F.	Document Page 10 of 58	se number (if known)	
3. C a	ars, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
	No				
	Yes				
3.1	Model: Year:	Toyota Highlander 2004 mate mileage:	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	citato property :	portion you own:
	2004 T	Toyota Highlander	Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
□ 5 A			own for all of your entries from Part 2, including any number here		\$2,000.00
Part	3: Descri	ibe Your Personal and Household	I Items		
Do y	ou own o	or have any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples:] No	goods and furnishings Major appliances, furniture, linen	s, china, kitchenware		
	Yes. De		oods and furniture		\$800.00
E		Televisions and radios; audio, vic including cell phones, cameras.	deo, stereo, and digital equipment; computers, printers, so, , media players, games	canners; music collection	ns; electronic devices
E	xamples: ■ No	collections, memorabilia, collec	s, prints, or other artwork; books, pictures, or other art objetibles	ects; stamp, coin, or base	eball card collections; other
	Yes. De	escribe			
E		for sports and hobbies Sports, photographic, exercise, a instruments	and other hobby equipment; bicycles, pool tables, golf club	os, skis; canoes and kaya	aks; carpentry tools; musical
_	Yes. De	escribe			
	Firearms Examples No Yes. De	:: Pistols, rifles, shotguns, ammu	inition, and related equipment		
	Clothes <i>Examples</i> I No	: Everyday clothes, furs, leather of	coats, designer wear, shoes, accessories		

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	Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29	Desc Main
Del	Document Page 11 of 58 Williams, Lesa F. Case 10-22705 Doc 1 Filed 07/15/10 Document Page 11 of 58 Case number (if known)	
ı	Yes. Describe	
	wearing apparel	\$700.00
ļ	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, s No Yes. Describe	silver
13. I	Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe Any other personal and household items you did not already list, including any health aids you did not list	
ı	■ No □ Yes. Give specific information	
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$1,500.00
	Describe Your Financial Assets you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
į	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes	
	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage hous institutions. If you have multiple accounts with the same institution, list each. ☐ No	es, and other similar
	Yes Institution name:	
	17.1. Checking Account Bank of America	\$500.00
	17.2. Savings Account Bank of America	\$300.00
_	Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No	
	Yes Institution or issuer name:	
	US Saving Bonds	\$1,000.00
_	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in joint venture	n an LLC, partnership, and
	■ No ☐ Yes. Give specific information about them Name of entity: % of ownership:	
	Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them	
L	→ Tes. Give specific information about them	

		Case 16-22705	Doc 1	Filed 07/15/16	Entered 07/15/16 08:02:29	Desc Main
De	ebtor 1	Williams, Lesa F.		Document	Page 12 of 58 Case number (if known)	
		Issu	er name:			
21.	Examp	List each account separatel	A, Keogh, 401	I (k), 403(b), thrift savings Institution r 401(k) an		lans \$21,000.00
_						
22.	Your si Examp ■ No		you have mad	ent, public utilities (electri	ne service or use from a company ic, gas, water), telecommunications companies, name or individual:	or others
	■ No □ Yes	ies (A contract for a periodi	e and descript		e or for a number of years)	
24.		s in an education IRA, in C. §§ 530(b)(1), 529A(b), a		າ a qualified ABLE prog	ram, or under a qualified state tuition progr	am.
	☐ Yes	Institution na	ame and desc	ription. Separately file the	records of any interests.11 U.S.C. § 521(c):	
	■ No	equitable or future interesting.		rty (other than anything	glisted in line 1), and rights or powers exerc	sisable for your benefit
	Examp ■ No	s, copyrights, trademarks oles: Internet domain names Give specific information a	, websites, pro			
27.	License Examp ■ No	es, franchises, and other	general intan sive licenses,		oldings, liquor licenses, professional licenses	
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owed to you	out them, incl	uding whether you alread	y filed the returns and the tax years	
	Examp ■ No	support bles: Past due or lump sum Give specific information	• • •	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Examp	unpaid loans you mad	y insurance p		ts, sick pay, vacation pay, workers' compensat	ion, Social Security benefits;
	Interes	Give specific information ts in insurance policies bles: Health, disability, or life	insurance; he	ealth savings account (HS	SA); credit, homeowner's, or renter's insurance	
		Name the insurance compa	ny of each pol	·		
Off	icial Forr	n 106A/B		Schedule A/B: F	Property	page 5

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Debtor 1	Williams, Lesa F.		Case number (if known)	
	Com	npany name:	Beneficiary:	Surrender or refund value:
If you a died. ■ No		lue you from someone who has trust, expect proceeds from a life	s died e insurance policy, or are currently entitled to receive p	property because someone has
Exam _l ■ No		nt disputes, insurance claims, or r	wsuit or made a demand for payment rights to sue	
■ No	contingent and unliquidate Describe each claim	•	uding counterclaims of the debtor and rights to s	et off claims
■ No	nancial assets you did not Give specific information	already list		
		our entries from Part 4, includin	ng any entries for pages you have attached for	\$22,800.00
Part 5: De	escribe Any Business-Related	I Property You Own or Have an Inte	erest In. List any real estate in Part 1.	
No. Go	own or have any legal or equito to Part 6. Go to line 38.	itable interest in any business-relat	ted property?	
Part 6: De		ercial Fishing-Related Property Yo armland, list it in Part 1.	u Own or Have an Interest In.	
■ No.	Jown or have any legal or Go to Part 7. s. Go to line 47.	equitable interest in any farm-	or commercial fishing-related property?	
Part 7:	Describe All Property You	Own or Have an Interest in That Yo	ou Did Not List Above	
•	u have other property of ar ples: Season tickets, country	ny kind you did not already list	?	

Official Form 106A/B Schedule A/B: Property page 6

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

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Case number (if known) Document Debtor 1 Williams, Lesa F.

List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$2,000.00 Part 3: Total personal and household items, line 15 57. \$1,500.00 58. Part 4: Total financial assets, line 36 \$22,800.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$26,300.00 Copy personal property total \$26,300.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$26,300.00

Official Form 106A/B Schedule A/B: Property page 7 Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29 Desc Main

			III PAUE 13 UI 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Lesa F. Williams			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	SION
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property		portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	700 N Mayfield Ave	\$0.00		\$15,000.00	735 ILCS 5/12-901
	Chicago IL, 60644-1027 Line from Schedule A/B 1.3			100% of fair market value, up to any applicable statutory limit	
	Toyota Highlander	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(c)
	2004 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	household goods and furniture Line from Schedule A/B 6.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line Hom Schedule A/B. 6.1	Elife from conceder 772.			100% of fair market value, up to any applicable statutory limit	
	wearing apparel Line from Schedule A/B 11.1	\$700.00		\$700.00	735 ILCS 5/12-1001(a)
	Line from our our our PAD. TT.			100% of fair market value, up to any applicable statutory limit	
	Bank of America Line from Schedule A/B 17.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
	End from Goriodate 77D. TTT			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	,,,		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Bank of America	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
US Saving Bonds Line from Schedule A/B 18.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line nom Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
401(k) and IRA	\$21,000.00			735 ILCS 5/12-1006
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

☐ Yes

Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29 Desc Main Document Page 17 of 58 Fill in this information to identify your case: Debtor 1 Lesa F. Williams Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured portion much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this value of collateral. claim If any **Bayview Financial Loan** Describe the property that secures the claim: \$315,800.00 \$260,000.00 \$55,800.00 Creditor's Name 694 Biltmore Dr, Bartlett, IL 60103-2326 improved real estate As of the date you file, the claim is: Check all that 2601 S Bayshore Dr FI 4 apply. Miami, FL 33133-5413 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ■ Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 5785 Describe the property that secures the claim: **Bk of Amer** \$12,764.00 \$260,000.00 \$12,764.00 Creditor's Name 694 Biltmore Dr, Bartlett, IL 60103-2326 improved real estate As of the date you file, the claim is: Check all that 4909 Savarese Cir Tampa, FL 33634-2413 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Nature of lien. Check all that apply. Who owes the debt? Check one. An agreement you made (such as mortgage or secured ■ Debtor 1 only

Date debt was incurred

☐ Check if this claim relates to a

☐ At least one of the debtors and another

☐ Debtor 1 and Debtor 2 only

community debt

Schedule D: Creditors Who Have Claims Secured by Property

7661

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Debtor 2 only

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Debtor 1 Lesa F. Williams		Case number (if know)				
First Name Middle N	ame Last Name					
2.3 FIRST MIDWEST BANK	Describe the property that secures the claim:	\$480,000.00	\$175,000.00	\$305,000.00		
Creditor's Name	700 N Mayfield Ave, Chicago, IL 60644-1027		· · · · · · · · · · · · · · · · · · ·			
180 N La Salle St Ste	improved real estate					
2500	As of the date you file, the claim is: Check all th	at				
Chicago, IL 60601-2705	apply. ☐ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Number, Street, City, State & Zip Code						
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured				
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)				
At least one of the debtors and another	_	:ii)				
	Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
2.4 Ocwen Loan Servicing L	Describe the property that secures the claim:	\$194,100.00	\$70,000.00	\$124,100.00		
Creditor's Name	1814 N Lotus Ave, Chicago, IL		\(\) \(\)	<u> </u>		
	60639-4231					
	improved real estate					
40050 la manualta Da	As of the date you file, the claim is: Check all th	at				
12650 Ingenuity Dr	apply.					
Orlando, FL 32826-2703	Contingent					
Number, Street, City, State & Zip Code	Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured				
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit	11)				
☐ Check if this claim relates to a	☐ Other (including a right to offset)					
community debt	Other (including a right to onset)					
Date debt was incurred	Last 4 digits of account number 38	801				
Add the dollar value of your entries in Col	lumn A on this page. Write that number here:	\$1,002,664.00	រា			
If this is the last page of your form, add th	e dollar value totals from all pages.	\$1,002,664.00	7			
Write that number here:		\$1,002,664.00	<u>'</u>			
Part 2: List Others to Be Notified for	r a Debt That You Already Listed					
Use this page only if you have others to b trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that we to someone else, list the creditor in Part 1, a you listed in Part 1, list the additional creditors	nd then list the collection agenc	y here. Similarly, if yo	ou have more		
	no pago.					
Name, Number, Street, City, State & 2 Bank Od America	Zip Code Oi	n which line in Part 1 did you enter	the creditor?			
NC4-105-03-14	La	ast 4 digits of account number 76	<u>661</u>			
PO Box 26012						
Greensboro, NC 27420-601	2					
Name Number Office City City City City	7in Code					
Name, Number, Street, City, State & 2 Bayview Financial Loan	Zip Code Oi	n which line in Part 1 did you enter	the creditor? 2.1			
Bankruptcy Dept	l s	ast 4 digits of account number57	785			
4425 Ponce de Leon Blvd F						
Miami, FL 33146-1837						

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Debtor 1	ebtor 1 Lesa F. Williams			Case number (f know)	
	First Name	Middle Name	Last Name		
Od At 16	me, Number, Street, City, cwen Loan Sevicin ttn: Research Dept 661 Worthington Ro est Palm Beach, Fl	g LLC discount of the state of		On which line in Part 1 did you ente Last 4 digits of account number 3	

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		Document	Page 2	0 of 58	_
Fill in this i	information to identify your c	case:			
Debtor 1	Lesa F. Williams]
	First Name	Middle Name	Last Name		
Debtor 2	F: (A)	ACTUAL N			
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS, EAS	TERN DIVISION	
Case numb	or				
(if known)					☐ Check if this is an
					amended filing
O(() - 1 - 1 - E	T 400E/E				
	Form 106E/F				4044
		ho Have Unsecured			12/15 IPRIORITY claims. List the other party to
Schedule G: I D: Creditors \ he Continuat case number	Executory Contracts and Unexpi Who Have Claims Secured by Pro- tion Page to this page. If you haw (if known).	ired Leases (Official Form 106G). D operty. If more space is needed, co re no information to report in a Par	o not include opy the Part yo	any creditors with partially s ou need, fill it out, number th	Property (Official Form 106A/B) and on secured claims that are listed in Schedule ne entries in the boxes on the left. Attach dditional pages, write your name and
	List All of Your PRIORITY Uns				
	creditors have priority unsecured	d claims against you?			
	Go to Part 2.				
☐ Yes.					
	List All of Your NONPRIORIT				
3. Do any o	creditors have nonpriority unsec	ured claims against you?			
☐ No. Y	ou have nothing to report in this pa	art. Submit this form to the court with	your other sche	edules.	
Yes.					
unsecure	ed claim, list the creditor separately		, identify what t	type of claim it is. Do not list cla	tor has more than one nonpriority aims already included in Part 1. If more laims fill out the Continuation Page of Part
					Total claim
	nex	Last 4 digits of acc	ount number	2333	\$3,981.00
Non	priority Creditor's Name	When was the debt	incurred?		
PO	Box 297871	When was the debi	i iliculi eu :		
_	rt Lauderdale, FL 33329-7	7871			
	nber Street City State Zlp Code	As of the date you	file, the claim	is: Check all that apply	
	o incurred the debt? Check one.				
= [Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	_	RITY unsecure	d claim:	
	Check if this claim is for a comn				
deb Is th	nt ne claim subject to offset?	☐ Obligations arising report as priority clai		aration agreement or divorce the	nat you did not
.s ■ 1	-	<u></u> ' ' '		ng plans, and other similar deb	ots
_ ·		<u>_</u>	p.o.n ondin	.g p and callet offinial deb	
Ц`	res	Other. Specify			

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Case number (if know) Debtor 1 Williams, Lesa F. 4.2 Last 4 digits of account number 0793 \$146.00 At T Nonpriority Creditor's Name When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 CITY OF CHICAGO-WATER D Last 4 digits of account number \$3,000.00 Nonpriority Creditor's Name **DEPAUL CENTER - LOWER LEVEL** When was the debt incurred? 333 S. STATE STREET CHICAGO, IL 60604-3979 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify service at 1814 N. Lotus Chicago, IL ☐ Yes 4.4 Comenity Bank/Lnbryant Last 4 digits of account number \$442.00 9578 Nonpriority Creditor's Name When was the debt incurred? PO Box 182789 Columbus, OH 43218-2789 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Williams, Lesa F. Case number (if know) 4.5 \$9,130.00 **Discover Fin Svcs LLC** Last 4 digits of account number 7727 Nonpriority Creditor's Name When was the debt incurred? PO Box 15316 Wilmington, DE 19850-5316 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 Fed Loan Serv Last 4 digits of account number 0010 \$20,500.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.7 **Fed Loan Serv** Last 4 digits of account number 0009 \$19,541.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Williams, Lesa F. Case number (if know) \$19,541.00 4.8 Fed Loan Serv Last 4 digits of account number 8000 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Fed Loan Serv Last 4 digits of account number 0007 \$19,197.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 **Fed Loan Serv** Last 4 digits of account number 0006 \$12,391.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Williams, Lesa F. Case number (if know) \$10,820.00 4.11 Fed Loan Serv Last 4 digits of account number 0005 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.12 Fed Loan Serv Last 4 digits of account number 0001 \$7,723.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.13 **Fed Loan Serv** Last 4 digits of account number 0004 \$7,664.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 60610 Harrisburg, PA 17106-0610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (f know)

	Williams, Lesa F.	Case Harrison (I know)	
4.14	Fed Loan Serv	Last 4 digits of account number 0003	\$6,019.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 60610		
	Harrisburg, PA 17106-0610 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify	
4.15	Fed Loan Serv	Last 4 digits of account number 0002	\$1,135.00
	Nonpriority Creditor's Name		, , , , , , , , , , , , , , , , , , ,
	PO Box 60610	When was the debt incurred?	
	Harrisburg, PA 17106-0610		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.46	Dharidana hamadiata Carall C	Last 4 divita of account number 0707	* 404.00
4.16	Physicians Immediate Care LLC Nonpriority Creditor's Name	Last 4 digits of account number 0797	\$131.00
		When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify	

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Case number (if know)

Debtor 1 Williams, Lesa F. 4.17 \$164,658.00 **Real Time Resolutions** Last 4 digits of account number 2598 Nonpriority Creditor's Name When was the debt incurred? 1349 Empire Central Dr Dallas, TX 75247-4066 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.18 Last 4 digits of account number **Urban Bank Partnership** unknown Nonpriority Creditor's Name When was the debt incurred? 7936 S Cottage Grove Ave Chicago, IL 60619-3911 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Afni Line **4.2** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1310 Martin Luther King Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims **Bloomington, IL 61701-1465** Last 4 digits of account number 0793 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims Afni, Inc. Line 4.2 of (Check one): PO Box 3097 ■ Part 2: Creditors with Nonpriority Unsecured Claims Bloomington, IL 61702-3097 Last 4 digits of account number 0793 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Amex** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Correspondence Part 2: Creditors with Nonpriority Unsecured Claims PO Box 981540 El Paso, TX 79998-1540 Last 4 digits of account number 2333 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

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On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Williams, Lesa F.		Case number (f know)		
Fed Loan Servicing CBE Group PO Box 900	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Waterloo, IA 50704-0900	Last 4 digits of account number	0002		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
The Affiliated Group I	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 7739		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Rochester, MN 55903-7739	Last 4 digits of account number	0797		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
The Affiliated Group I	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 7739 Rochester, MN 55903-7739		Part 2: Creditors with Nonpriority Unsecured Claims		
,	Last 4 digits of account number	0797		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
		you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	306,019.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	306,019.00

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			III PAUE / 9 UI DO				
Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Lesa F. Williams						
	First Name	Middle Name	Last Name	_			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Numbe	n whom you have the or, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	Nullibei	Sileet			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	Number	Olleet			
	City		State	ZIP Code	_
2.3	- · · · · ·				
	Name				_
	Number	Street			<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4	O.I.,		Ciaio	2 0000	
	Name				<u> </u>
					_
	Number	Street			
	City		State	ZIP Code	_
2.5	City		Otate	Zii Code	
2.0	Name				_
	Hanno				
	Number	Street			
	City		State	ZIP Code	<u> </u>
	Oily		State	ZIF COUE	

Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29 Desc Main Page 30 of 58 Document Fill in this information to identify your case: Debtor 1 Lesa F. Williams Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line

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Street

Number

Name

Number

City

3.2

State

State

ZIP Code

ZIP Code

☐ Schedule G, line

☐ Schedule D, line

☐ Schedule E/F, line ☐ Schedule G, line

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Fill	I in this information to identify your ca	se:							
	btor 1 Lesa F. Willi								
_	ebtor 2 ouse, if filing)				_				
Uni	ited States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, I	EASTERN					
	ise number (mown)					ed filing ent show	ing postpetition o	chapter 13	
<u>O</u>	fficial Form 106I					MM / DD/ `	/YYY		
S	chedule I: Your Inco	ome							12/15
sup spo atta	as complete and accurate as possipplying correct information. If you abuse. If you are separated and your ach a separate sheet to this form. Our action is a separate sheet to the separate sheet	are married and not filing spouse is not filing with	g jointly, and you h you, do not inc	ır spouse is lude informa	livin ition	g with you, inclu about your spou	de inforr se. If mo	nation about your government of the space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status*	■ Employed			☐ Empl	oyed		
		Employment status	☐ Not employed			☐ Not e	mployed	I	
	employers.	Occupation	See Schedu	e Attached	l				
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student o homemaker, if it applies.	Employer's address							
Pa	rt 2: Give Details About Mon	How long employed th		Attachment	for <i>i</i>	Additional Emplo	/ment In	formation	
Esti	imate monthly income as of the da ess you are separated.		ou have nothing to	report for any	/ line	, write \$0 in the sp	ace. Incl	ude your non-filir	ng spouse
	ou or your non-filing spouse have more ce, attach a separate sheet to this forr		oine the informatio	n for all emplo	yers	for that person on	the lines	below. If you ne	ed more
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	6,006.24	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$ _	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	6,006.24	\$_	N/A	

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Debt	tor 1	Williams, Lesa F.	_	(Case	e number (<i>if kn</i>	own)				
					Fo	r Debtor 1			Debtor 2		
	Cop	py line 4 here	4.		\$_	6,006	.24	\$		N/A	
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	1,583	95	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c	:.	\$.00	\$		N/A	•
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0	.00	\$		N/A	•
	5e.	Insurance	5e	·.	\$	0	.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$_	0	.00	\$		N/A	
	5g.	Union dues	5g		\$_		.00	\$		N/A	•
	5h.	Other deductions. Specify:	5h	1.+	\$_	0	.00	+ \$		N/A	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,583	.95	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,422	.29	\$		N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b		Ψ_ \$.00 .00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$.00	\$		N/A	•
	8e.	Social Security	8e	·.	\$	0	.00	\$		N/A	•
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0	.00	\$		N/A	
	8g.	Pension or retirement income	— 8g	١.	\$	0	.00	\$		N/A	•
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0	.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$	0	.00	\$		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,422.29	+ \$		N/A =	\$	4,422.29
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L	_			L				
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	epende				•			+\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain							Ĺ	Combin	
13.	Do	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						n	nonthly	/ income

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Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Chamberlain College of Nursing	
How long employed	5 months	
Address of Employer	3005 Highland Pkwy Downers Grove, IL 60515-5682	
Debtor		
Occupation	nursing professor	
Name of Employer	DePaul University	
How long employed	3 months	
Address of Employer	1 E Jackson Blvd Chicago, IL 60604-2201	
Debtor		
Occupation		
Name of Employer	ELITE Management	
How long employed	13 years	
Address of Employer	568 S Washington St Naperville, IL 60540-6843	

Official Form 106I Schedule I: Your Income page 3

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Fill	in this informat	tion to identify you	ur case:							
Debtor 1 Lesa F. Williams					Check if this is:					
<u>.</u>							An amen	Ü		
	otor 2 ouse, if filing)								ving postpetition chapte following date:	er 13
Unit	ted States Bankru	uptcy Court for the:		IERN DISTRICT OF ILLIN RN DIVISION	OIS,		MM / DD	/ YYYY		
			27.012	THE DIVISION						
1	se number (nown)									
(
\bigcirc	fficial Fo	rm 106 l								
		J: Your E	 Vnan	505						40/4
				If two married people are	filing together, bot	h are equa	ally respon	sible for		12/1
info	ormation. If mo	ore space is nee	ded, attac	ch another sheet to this fo						mbe
(if I	known). Answ	er every questio	n.							
Par		ibe Your Househ	nold							
1.	Is this a join									
	■ No. Go to									
		s Debtor 2 live in	a separa	te household?						
	□ No	-	t file Officia	al Form 106J-2, <i>Expenses</i> a	for Separate Househ	noldof Debt	or 2.			
2.	Do you have	e dependents?	□ No							
	Do not list De	ebtor 1 and	Yes.	Fill out this information for	Dependent's relati			ndent's	Does dependent	
	Debtor 2.			each dependent	Debtor 1 or Debtor	r 2	age		live with you?	
	Do not state	the							□ No	
	dependents r	names.			brother		50		Yes	
									□ No □ Yes	
									□ Yes □ No	
									☐ Yes	
									□ No	
									☐ Yes	
3.	•	enses include people other the	an 🔳	No						
		l your dependen		Yes						
Dor	rt 2: Estima	ate Your Ongoin	a Manthl	v Evnances						
				ptcy filing date unless yo	ou are using this for	rm as a su	pplement	in a Chap	ter 13 case to report	
exp				is filed. If this is a supple						•
Inc	lude expenses	s paid for with no	on-cash g	overnment assistance if	you know the					
			e include	d it on Schedule I: Your I	ncome			Your exp	ansas	
(Or	ficial Form 100	ol.)						Tour exp		
4.	The rental o	r home ownersh	ip expens	ses for your residence. In	clude first mortgage					
		d any rent for the			0 0	4.	\$		2,800.00	
	If not include	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
	•	ty, homeowner's,				4b.			300.00	
		maintenance, rep				4c.	· —		0.00	
5.		owner's association		ominium dues ur residence, such as hon	ne equity loans	4d. 5.			0.00	
J.	Additional II	gage paymer	ioi y0	ar residence, such as HUII	io oquity iodilo	J.	Ψ		U.UU	

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Debtor 1 Will	iams, Lesa F.	ase num	ber (if known)	
6. Utilities:				
	tricity, heat, natural gas	6a.	\$	250.00
	er, sewer, garbage collection	6b.	\$	100.00
	phone, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	er. Specify:	6d.		0.00
	housekeeping supplies	- ⁷ .	\$	300.00
	and children's education costs	8.	\$	
			·	0.00
<u> </u>	aundry, and dry cleaning	9.	\$	100.00
	are products and services	10.	\$	200.00
	nd dental expenses	11.	\$	0.00
	ation. Include gas, maintenance, bus or train fare. ude car payments.	12.	\$	500.00
	nent, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	contributions and religious donations	14.		0.00
5. Insurance	•		·	0.00
	ude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life		15a.	\$	0.00
	th insurance	15b.	·	0.00
	cle insurance	15c.	\$	80.00
	er insurance. Specify:	15d.	·	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.	_ 100.	Ψ	0.00
Specify: _		16.	\$	0.00
	t or lease payments: payments for Vehicle 1	17a.	\$	0.00
	payments for Vehicle 2	17a. 17b.		
		17b.	·	0.00
17c. Othe		_		0.00
17d. Othe	· · ·	17d. 	\$	0.00
	nents of alimony, maintenance, and support that you did not report as from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ments you make to support others who do not live with you.		\$	0.00
Specify:	уст	19.		0.00
	property expenses not included in lines 4 or 5 of this form or on Schedul	_	r Income.	
	gages on other property	20a.		1,500.00
	estate taxes	20b.	\$	0.00
	erty, homeowner's, or renter's insurance	20c.	·	0.00
•	stenance, repair, and upkeep expenses	20d.		100.00
	eowner's association or condominium dues	20e.		0.00
1. Other: Spe		21.	·	
. Onler. Spe		_ 21.	τ φ	0.00
2. Calculate	your monthly expenses			
22a. Add li	nes 4 through 21.		\$	6,330.00
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add lir	ne 22a and 22b. The result is your monthly expenses.		\$	6,330.00
	, , ,		<u> </u>	3,300.00
	your monthly net income.		•	
	y line 12 (your combined monthly income) from Schedule I.	23a.	·	4,422.29
23b. Copy	y your monthly expenses from line 22c above.	23b.	\$	6,330.00
	ract your monthly expenses from your monthly income.		<u></u>	4 007 74
The	result is your monthly net income.	23c.	\$	-1,907.71
For example	pect an increase or decrease in your expenses within the year after you fi, do you expect to finish paying for your car loan within the year or do you expect your moto the terms of your mortgage?			or decrease because of a
☐ Yes.	Explain here:			

modification to the terms of your mortgage?								
■ No.								
☐ Yes.	Explain here:							

	nation to identify your o	case:			
Debtor 1	Lesa F. Williams	Middle Name	Last Name		
Debtor 2	rustivanio	MIDDIO MARITO	rast Manie		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN D	IVISION	
Case number				ł	
(if known)					☐ Check if this is an
					amended filing
Official Form	106Dec				
		an Individual	Debtor's Sch	ealuber	40/48
D O O I GI I G I	10117120410	······································	DODIOI 3 GOI	icaaics	12/15
If two married peo	ople are filing together,	, both are equally respon	sible for supplying correct	information.	
You must file this	form whenever you fil	a hankruntev echadulae	or amonded echedules. Ma	king a falsa atatam	ent, concealing property, or
obtaining money	or property by fraud in	n connection with a bankı	ruptcy case can result in fi	nes up to \$250,000,	or imprisonment for up to 20
years, or both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attorr	ney to help you fill out bank	kruptcy forms?	
— Na					
■ No					
Yes. Na	ame of person	····			ruptcy Petition Preparer's Notice,
				Declaration,	and Signature (Official Form 119)
11					
	ry ot perjury, i deciare t true and correct.	nat I have read the sumn	nary and schedules filed w	ith this declaration	and
/ \ \ \ \ \	0 11210	1			
X / //	Williams	luns	Signature of De	ahtor 2	
	e of Debtor 1		Oignature of De	DOIO! E	
Date !	lv. 42, 2046		Date		
Date J	uly 12, 2016				

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		Documei	nt Page 37 of 5	8	
Fill in this inforn	nation to identify your	case:			
Debtor 1	Lesa F. Williams				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DI	VISION	
Case number					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	26,300.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,002,664.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	306,019.00
	Your total liabilities	\$	1,308,683.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,422.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,330.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her schedu	les.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, far	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo	x and subr	nit this form to the

court with your other schedules.

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Debtor 1 Williams, Lesa F.

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

4,822.84 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

="10.5" 41		0-1-1-11-06		SECTION AND PARTY OF THE PARTY	COMPANDED DEP	
Fill in ti	nis intorma	tion to identify your	case:		-	
Debtor '	1	Lesa F. Williams	Middle Name	Last Name		
Debtor 2	2					
(Spouse if	, filing)	First Name	Middle Name	Last Name		
United S	States Bank	ruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS, EASTERN DIV	ISION	
Case nu	umber					
(if known)	9 2		-			heck if this is an
					a	mended filing
O.C	–	407				
	<u>ial For</u> i		A CC . C . I			
State	ment	of Financial /	Affairs for Individ	luals Filing for B	ankruptcy	4/10
					qually responsible for supply additional pages, write your r	
		every question.	ation a departite energy to the	io torriii ori tiro top or arry	additional pages, write your i	iamo ana saso nambo
Part 1:	Give De	tails About Your Ma	rital Status and Where You I	Lived Before		
1. Wh	at is vour	current marital status	s?			
	at io your t	arront marriar status				
	Married					
П	Not marrie	ed				
2. Dur	ring the las	t 3 years, have you l	ived anywhere other than w	here you live now?		
	No					
	200	all of the places you liv	ed in the last 3 years. Do not in	nclude where you live now.		
De	btor 1 Prio	r Address:	Dates Debtor 1 li there	ived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					by property state or territory?	
-	· Na					
_	No Yes, Make	sure you fill out Sche	edule H: Your Codebtors (Offic	tial Form 106H).		
CONTRACTOR				,		
Part 2	Explain	the Sources of Your	Income			***************************************
Fill	in the total	amount of income you	ployment or from operating a received from all jobs and all ave income that you receive to	I businesses, including part-		ar years?
ii ye	ou are ming	a joint case and you n	ave income that you receive to	gettier, list it offly office under	Debtor 1.	
	No					
	Yes. Fill in	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$28,500.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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De	οιοι <u>Μ</u>	<u>rilliams, Le</u>	esa F.		Case	e number(if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app	,	าร
		ndar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$56,639.00	☐ Wages, comm bonuses, tips	nissions,	
				☐ Operating a business		Operating a be	usiness	
		dar year be December		☐ Wages, commissions, bonuses, tips	\$69,986.00	☐ Wages, comm	tissions,	
				☐ Operating a business		Operating a bi	usiness	
	Include in other pub you are fil List each	come regard lic benefit pa ing a joint ca	less of whether yments; pensio se and you hav he gross incom	during this year or the two that income is taxable. Examins; rental income; interest; dive income that you received toge from each source separately	ples of other income are alime idends; money collected from gether, list it only once under [lawsuits; royalties; a Debtor 1.	Social Security, unemployment, and gambling and lottery winning	, an gs. I
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of Incomposition Describe below.	me Gross Income (before deduction and exclusions)	าร
Ра 6.				Made Before You Filed for E debts primarily consumer				
v.	□ No.	Neither D	ebtor 1 nor De		mer debts. Consumer debts	are defined in 11 U.S	S.C. § 101(8) as "incurred by an	1
			90 days before	you filed for bankruptcy, did	you pay any creditor a total of	\$6,425* or more?		
		□ No.	Go to line 7.					
		☐ Yes	creditor. Do payments to	nch creditor to whom you paid not include payments for don an attorney for this bankrupton 4/01/19 and every 3 years a	nestic support obligations, su y case.	ch as child support	s and the total amount you paid and alimony. Also, do not inclu istment.	tha ide
	■ Yes			both have primarily consule you filed for bankruptcy, did		\$600 or more?		
		■ No.	Go to line 7.					
		□ _{Yes}		r domestic support obligations			aid that creditor. Do not include include payments to an attorney	
	Credito	r's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for	
7.	Insiders i which you	nclude your r u are an offic	elatives; any ge er, director, per	son in control, or owner of 20°	y general partners; partnership % or more of their voting secu	ps of which you are a rities; and any mana	as an insider? a general partner; corporations or ging agent, including one for a as child support and alimony.	of
	■ No Yes	List all payn	nents to an insi	der.				
	Insider	s Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Reason for this payment	

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De	btor 1 Williams, Lesa F.		Case	number(if known)		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosig		ments or transfer any	y property on ac	count of a debt that	benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this p	
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.					y modifications,
	□ No ■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	•
	Bank of New York v. Lesa Williams	foreclosure 7302	Circuit Court of	Cook	Pending	
	2015-CH-17062	S. Dorchester Chicago, IL	County, IL 50 W Washingto	on St Rm	☐ On appeal ☐ Concluded	
		3 .,	1001 Chicago, IL 606		■ Concluded	
			Cilicago, IL 000			
	Urban Partnership Bank v. Lesa	foreclosure 4263	Circuit Court of	Cook	Pending	
	Williams 12 CH 28424	W. Cermak Chicago, IL	County, IL 50 W Washingto	on St Rm	On appeal	
			1001 Chicago, IL 606		Concluded	
	US Bank National Association v.	foreclosure 5326	Circuit Court of	Cook	☐ Pending	
	Lesa Williams	W. Ferdinand	County, IL	O4 D	☐ On appeal	
	2011-CH-16007	Chicago, IL	50 W Washingto 1001 Chicago, IL 606	•	■ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.	y, was any of your prope	erty repossessed, for	eclosed, garnish	ed, attached, seized	i, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			
	City of Chicago 120 S La Salle St Chicago, IL 60603-3403	wage garnishment biweekly since 02/16 \$225 per paycheck		/16		\$675.00
	Officago, 12 00000-0400	Property was reposse				
		☐ Property was foreclos		·		
		Property was garnish				
	·	☐ Property was attache	u, seized of levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca	tcy, did any creditor, incluse you owed a debt?	luding a bank or fina	ncial institution,	set off any amounts	s from your
	Yes. Fill in the details.			•		
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was 1	Amount

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Det	otor 1 Williams, Lesa F.	Case number	(if known)				
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o	ptcy, was any of your property in the possession of an a r another official?	ssignee for the benefi	t of creditors, a			
	■ No						
	☐ Yes						
Par	t 5: List Certain Gifts and Contribution	is .					
13.	Within 2 years before you filed for banki	uptcy, did you give any gifts with a total value of more th	an \$600 per person?				
	No						
	Yes. Fill in the details for each gift.	O now Describe the rifts	Datas vev save	Value			
	Gifts with a total value of more than \$60 person	0 per Describe the gifts	Dates you gave the gifts	value			
	Person to Whom You Gave the Gift and Address:						
14.	□ No	uptcy, did you give any gifts or contributions with a total	value of more than \$6	600 to any charity?			
	Yes. Fill in the details for each gift or co	ontribution.	•				
	Gifts or contributions to charities that more than \$600	total Describe what you contributed	Dates you contributed	Value			
	Charity's Name Address (Number, Street, City, State and ZIP Code)						
	Mars Hill Baptist Church	money	most everv	\$800.00			
	5916 W Lake St	•	week				
	Chicago, IL 60644-1833		\$10/week				
200	Lich Cortain Lange						
	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you lose anyt	hing because of theft,	fire, other disaster,			
	□ No						
	Yes. Fill in the details.						
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property			
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 ofSchedule A/B: Property.	loss	lost			
	gambling losses	indiance dame of the de destroate 772. 77 openy.	sporadic	\$2,000.00			
Par	t 7: List Certain Payments or Transfer	s					
16.	consulted about seeking bankruptcy or	ptcy, did you or anyone else acting on your behalf pay o preparing a bankruptcy petition? eparers, or credit counseling agencies for services required in		y to anyone you			
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid	Description and value of any property	Date payment or	Amount of			
	Address Email or website address	transferred	transfer was	payment			
	Person Who Made the Payment, if Not	ou .	mau u				
	Heller & Richmond, Ltd. 33 N Dearborn St Ste 1907	1050.00	08/20/2015	\$1,050.00			
	Chicago, IL 60602-3828						

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De	btor 1	Williams, Lesa F.			Case number	(if known)	
17.	prom	in 1 year before you filed for bankruptcy nised to help you deal with your creditor ot include any payment or transfer that you!	rs or to make payments			r transfer any proper	ty to anyone who
	_	No Yes. Fill in the details.					
		son Who Was Paid ress	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	trans Include gifts a	in 2 years before you filed for bankrupto ferred in the ordinary course of your bu- de both outright transfers and transfers mad and transfers that you have already listed or No	usiness or financial affai de as security (such as the	rs?			• • •
*	Pers Add	Yes. Fill in the details. son Who Received Transfer ress	Description and v property transfer			any property or s received or debts cchange	Date transfer was made
19.	Withi bene	on's relationship to you in 10 years before you filed for bankrup ficiary? (These are often called asset-prot No Yes. Fill in the details.	tcy, did you transfer any ection devices.)	r property to a se	elf-settled tru	st or similar device o	f which you are a
		e of trust	Description and v	alue of the prope	erty transferr	ed	Date Transfer was made
Pai	rt 8:	List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	ge Units		
20.	sold, Inclu- hous	in 1 year before you filed for bankruptcy moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial account	ts; certificates of			
		ne of Financial Institution and ress (Number, Street, City, State and ZIP)	Last 4 digits of account number	Type of accourtinstrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	•	ou now have, or did you have within 1 y , or other valuables?	ear before you filed for	bankruptcy, any	safe deposit	box or other deposit	ory for securities,
	_	No Yes. Fill in the details.					
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe the	contents	Do you still have it?
	416	NK OF AMERICA 1 Piedmont Pkwy ensboro, NC 27410-8110	Rebecca Willia 700 N Mayfield Chicago, IL, 60	Ave,	old person monetary v	al papers, no value	□ No ■ Yes
22.	Have	you stored property in a storage unit o	or place other than your	home within 1 ye	ar before yo	u filed for bankruptcy	y ?
	_	No Yes. Fill in the details.				•	
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, Sand ZIP Code)		Describe the	contents	Do you still have it?

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De	btor 1 Williams, Lesa F.		Case number(if known)	
Pa	rt 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someo someone.	one else owns? Include any property	y you borrowed from, are storing for	, or hold in trust for
	□ No ■ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Rebecca Williams 694 Biltmore Dr Bartlett, <u>I</u> L 60103-2326	CHASE Bank	checking account, debtor is listed on her mother's account	\$700.00
	Rebecca Williams 694 Biltmore Dr Bartlett, IL 60103-2326	US Bank	savings account, Debtor is listed on her mother's account	\$400.00
Pai	rt 10: Give Details About Environmental Informa	ation		
or	the purpose of Part 10, the following definitions	apply:	•	
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai controlling the cleanup of these substances, was	r, land, soil, surface water, groundw	- • · · · · · · · · · · · · · · · · · ·	
	Site means any location, facility, or property as own, operate, or utilize it, including disposal site		w, whether you now own, operate, o	r utilize it or used to
	Hazardous material means anything an environmaterial, pollutant, contaminant, or similar term		waste, hazardous substance, toxic s	ubstance, hazardous
Rep	ort all notices, releases, and proceedings that yo		they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	☐ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	and orders.
	■ No □ Yes, Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	•	·	
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)	

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Debtor	r 1 Williams, Lesa F.		Case number(if known)
	☐ A partner in a partnership		
	☐ An officer, director, or managing ex	xecutive of a corporation	
	☐ An owner of at least 5% of the votir	ng or equity securities of a corporation	
	No. None of the above applies. Go to	Part 12.	
	Yes. Check all that apply above and fi	II in the details below for each business.	
_	Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Address Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	•
			Dates business existed
28. W in:	fithin 2 years before you filed for bankrup stitutions, creditors, or other parties.	otcy, did you give a financial statement to a	anyone about your business? Include all financial
	I _{No}		
	Yes. Fill in the details below.		
A	lame Address Number, Street, City, State and ZIP Code)	Date Issued	
Part 1	2: Sign Below		
true an bankru 18 U.S. Lesa	nd correct. I understand that making a fals	se statement, concealing property, or obta 100, or imprisonment for up to 20 years, or	declare under penalty of perjury that the answers are ining money or property by fraud in connection with a both.
Date	July 12, 2016	Date	
Did yo ■ No □ Yes	, -	ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
Did yo	u pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupt	cy forms?
☐ Yes	. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Afni 1310 Martin Luther King Dr Bloomington, IL 61701-1465

Afni, Inc. PO Box 3097 Bloomington, IL 61702-3097

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Bank Od America NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012

Bayview Financial Loan Bankruptcy Dept 4425 Ponce de Leon Blvd Fl 5 Miami, FL 33146-1837

Bayview Financial Loan 2601 S Bayshore Dr Fl 4 Miami, FL 33133-5413 Bk of Amer 4909 Savarese Cir Tampa, FL 33634-2413

CITY OF CHICAGO-WATER D
DEPAUL CENTER - LOWER LEVEL
333 S. STATE STREET
CHICAGO, IL 60604-3979

Comenity Bank/Lane Bryant PO Box 18215 Columbus, OH 43218

Comenity Bank/Lnbryant PO Box 182789 Columbus, OH 43218-2789

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Fed Loan Serv PO Box 60610 Harrisburg, PA 17106-0610 Fed Loan Servicing PO Box 69184 Harrisburg, PA 17106-9184

Fed Loan Servicing CBE Group PO Box 900 Waterloo, IA 50704-0900

FIRST MIDWEST BANK 180 N La Salle St Ste 2500 Chicago, IL 60601-2705

Ocwen Loan Servicing L 12650 Ingenuity Dr Orlando, FL 32826-2703

Ocwen Loan Sevicing LLC Attn: Research Dept 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409-6493

Real Time Resolutions 1349 Empire Central Dr Dallas, TX 75247-4066

The Affiliated Group I PO Box 7739 Rochester, MN 55903-7739 Urban Bank Partnership 7936 S Cottage Grove Ave Chicago, IL 60619-3911 Case 16-22705 Doc 1 Filed 07/15/16 Entered 07/15/16 08:02:29 Desc Main Document Page 50 of 58

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No
Williams, Lesa F.	Chapter 7
Debtor(s)	
VERIFICATI	ON OF CREDITOR MATRIX
	Number of Creditors22
The above-named Debtor(s) hereby verifies that the	list of creditors is true and correct to the best of my (our) knowledge.
Date: July 12, 2016 Debtor	Williams
Design	
Loint Debtor	

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Fill in this information to identify your case:				
Debtor 1 Lesa F. Williams First Name Middle Name	Last Name			
Debtor 2	5			
(Spouse if, filing) First Name Middle Name	Last Name			
	FRICT OF ILLINOIS, EASTERN DIVISION			
Case number(if known)		☐ Check if this is an		
		amended filing		
Official Form 108		_		
Statement of Intention for Indiv	iduals Filing Under Chapte	12/15		
If you are an individual filing under chapter 7, you must fill	out this form if:			
creditors have claims secured by your property, or				
you have leased personal property and the lease has no You must file this form with the court within 30 days after y	ot expired. You file your bankruptcy petition or by the date set fo	or the meeting of creditors,		
whichever is earlier, unless the court extends the the form	time for cause. You must also send copies to the cr	editors and lessors you list on		
If two married people are filing together in a joint case, botl	n are equally responsible for supplying correct infor	mation. Both debtors must sign		
and date the form.		-		
Be as complete and accurate as possible. If more space is write your name and case number (if known).	needed, attach a separate sheet to this form. On the	top of any additional pages,		

	Candidate Miles Usus Claims Cooured by Branarty (O	fficial Form 106D) fill in the		
 For any creditors that you listed in Part 1 of Schedule D: information below. 				
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's Bayview Financial Loan	☐ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	Yes		
Description of 694 Biltmore Dr, Bartlett, IL property 60103-2326	Agreement.			
securing debt:	Retain the property and [explain]: Retain and pay pursuant to contract	_		
Creditor's Bk of Amer	☐ Surrender the property.	■ No		
name:	☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	Yes		
Description of 694 Biltmore Dr, Bartlett, IL	Agreement.	□ 165		
property 60103-2326 securing debt:	Retain the property and [explain]: Retain and pay pursuant to contract			
Securing debt.	Netalli and pay pursuant to contract			
Creditor's FIRST MIDWEST BANK	☐ Surrender the property.	□No		
name:	☐ Retain the property and redeem it.	_		
Description of 700 N Mayfield Ave, Chicago, IL	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes		
property 60644-1027	Retain the property and [explain]:			
securing debt:	Retain and pay pursuant to contract	-		

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Official Form 108

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Debtor 1 Williams, Lesa F.	Case number (if known)	
Creditor's Ocwen Loan Servicing L	■ Surrender the property. □ Retain the property and redeem it.	■ No
Description of 1814 N Lotus Ave, Chicago, IL property 60639-4231 securing debt:	☐ Retain the property and receeding. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	☐ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed the information below. Do not list real estate leases. Unexp may assume an unexpired personal property lease if the tr	pired leases are leases that are still in effect; the leas	
Describe your unexpired personal property leases	en en el este fall den fillandetamen fælkeld.	Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		□ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	y intention about any property of my estate that sect	ures a debt and any personal
x) ce Williams	<u> </u>	
Lesa F. Williams Signature of Debtor 1	Signature of Debtor 2	
Date July 12, 2016	Date	

 $_{\rm B201B~(Form~2}\mbox{Gase,16-22705}$

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Document Page 53 of 58 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No
Williams, Lesa F.		Chapter 7
·	Debtor(s)	

CERTIFICATION OF NOTION UNDER § 342(b) OF T		· ·
Certificate of [Non-Attorney	y] Bankruptcy Petitio	on Preparer
I, the [non-attorney] bankruptcy petition preparer signing the deb notice, as required by § 342(b) of the Bankruptcy Code.	tor's petition, hereby cer	tify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	'11	(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, repartner whose Social Security number is provided above.	sponsible person, or	
Certificate	e of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read th	e attached notice, as req	uired by § 342(b) of the Bankruptcy Code.
Williams, Lesa F.	_ X	7/15/2016
Printed Name(s) of Debtor(s)	Signature of Debt	or Date
Case No. (if known)	_ X	D.1. (%
	Signature of Joint	Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No
Williams, Lesa F.	Chapter 7
Debtor(s) CERTIFICATION OF NOTICE UNDER § 342(b) OF THE	
Certificate of [Non-Attorney] I	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debtor' notice, as required by § 342(b) of the Bankruptcy Code.	s petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of
x	the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, responsartner whose Social Security number is provided above.	onsible person, or
Certificate of	the Debtor
I (We), the debtor(s), affirm that I (we) have received and read the at	tached notice, as required by § 342(b) of the Bankruptcy Code.
Williams, Lesa F. Printed Name(s) of Debtor(s)	X X X 7/12/2016 Signature of Debtor Date
Case No. (if known)	X Signature of Joint Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Williams, Lesa F.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR D	EBTOR	
C	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pai	l to me, for services rendere	d or to
	For legal services, I have agreed to accept		\$	1,050.00	
	Prior to the filing of this statement I have received		\$	1,050.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compet firm.	nsation with any other person	unless they are mer	nbers and associates of my l	aw
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				m. A
5. I	n return for the above-disclosed fee, I have agreed to ren	der legal service for all aspec	ets of the bankruptcy	case, including:	
b c.	Analysis of the debtor's financial situation, and renderical Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors. [Other provisions as needed]	nent of affairs and plan which	h may be required;		v;
6. B	by agreement with the debtor(s), the above-disclosed fee	does not include the followin	g service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	or payment to me for	representation of the debtor	(s) in
Ju	ıly 15, 2016				
Do	·	Michael R. Richm Signature of Attorne Heller & Richmor	Py		
		33 N Dearborn St			
		Chicago, IL 60602 (312) 781-6700 F		2	
		mrichmond@hell			
		Name of law firm			

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Williams, Lesa I	F .		Case No.		
			Debtor(s)	Chapter	7	
	DIS	CLOSURE OF COMPEN	ISATION OF ATTOR	RNEY FOR I	DEBTOR	
C	ompensation paid to r	§ 329(a) and Fed. Bankr. P. 2016(b me within one year before the filing of the debtor(s) in contemplation of	of the petition in bankruptcy, o	or agreed to be pai	d to me, for services rendered	l or to
	For legal services	, I have agreed to accept		\$	1,050.00	
	Prior to the filing	of this statement I have received		\$	1,050.00	
	Balance Due	·····		\$	0.00	
2. T	he source of the comp	pensation paid to me was:				
	Debtor	☐ Other (specify):				
3. T	he source of compens	sation to be paid to me is:				
	Debtor	☐ Other (specify):				
4. ■	I have not agreed t firm.	o share the above-disclosed compen	sation with any other person u	nless they are mer	mbers and associates of my la	w
[☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					n. A
5. I	n return for the above	e-disclosed fee, I have agreed to rend	ler legal service for all aspects	of the bankruptcy	case, including:	
b c.	. Preparation and fili	tor's financial situation, and rendering of any petition, schedules, statem he debtor at the meeting of creditors s needed]	ent of affairs and plan which r	nay be required;		;
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:						
			CERTIFICATION			
	certify that the foregonkruptcy proceeding.	oing is a complete statement of any a	agreement or arrangement for p	payment to me for	representation of the debtor(s	s) in
Ju	ıly 12, 2016		/s/ Michael R. Richi			
Do	ate		Michael R. Richmo Signature of Attorney Heller & Richmond			
			33 N Dearborn St S	ite 1907		
			Chicago, IL 60602-		99	
			(312) 781-6700 Far mrichmond@heller			
			Name of law firm			

ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 20th day of August, 2015 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney) of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 and Lesa F. Williams (hereinafter referred to as "Client") of Chicago , IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

TERMS OF AGREEMENT

- 1. Professional Legal Services to be Provided.
- A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:
 - Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy;
 - 2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
 - 3. Representation of "Client" at the meeting of the creditors and confirmation hearing;
 - . Other: r
- B. Professional legal services to be provided by "Attorney" to "Client shall not include:
 - 1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
 - Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
 - Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
 - 4. The filing of any adversary complaint to determine the dischargability of an otherwise non-dischargeable debt.
 - 5. Representation at a 2004 examination
- 2. Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$ 1050.00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately four hundred dollars** (\$400.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -3- secured creditors; (Clients wish to retain principal residence)
- b. -20*- unsecured creditors; (*UP TO 30 UNSECURED CREDITORS)
- c. -0- priority debts; (GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE)

This stated "fee" has been further based upon "Client's representation that he/she has:

- a. -1- law suits pending against him/her; (City of Chicago))
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a. each secured creditor;
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors;
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client" s driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, if "Client" fails to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.

"Client" agrees to pay all fees and court costs as follows:

1. \$ 250.00 upon the execution of this agreement;

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$ 935 .00 and that any monies paid upon the execution of this agreement are non-refundable and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy.

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.

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4. Termination of Agreement.

A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.

B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause shall include, but shall not be limited to

the following:

- 1. "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
- 2. "Client's" failure to promptly pay legal fees or expenses incurred; or
- 3. Any other permissive or mandatory cause to withdraw form the Attorney-Client relationship as provided for in the Code of Professional Responsibility.

5. "Client" acknowledgment.

A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.

B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.

C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.

D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.

E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.

F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.

G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advise, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.

H. "Client" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Atterney" all known or suspected information requested by any aspect of the entire Bankruptcy Petition and that it is the responsibility of "Client" to be certain that this information is all accurately displayed in the actual Bankruptcy Petition at the time "Client" affixes his/her signature(s) thereto.

** costs include the court filing fee of \$335.00, the online prebankruptcy counseling of \$25.00* and online debt management class of \$15.00*, the 3-bureau credit report of \$38.00 per person and 3 years of tax transcripts at \$15.00 per tax year *surcharge of \$9.95 per class/session if Client performs the service by telephone as apposed to online

Chieff the forms the service by telephone as opposed to offine.	
Heller & Richmond; Ltd.	
	I AGREE TO ALL THE TERMS CONTAINED IN THIS DOCUMENT
Ву:	Les-Willians
HELLER & RICHMOND, LTD.	
33 N. Dearborn Street	By affixing my signature above, I hereby certify that
Suite 1907	I have not filed any petition for bankruptcy within the
Chicago, IL 60602	past 8 years, except as otherwise noted as follows:
(312) 78/1-6700	NONE
T1/	
I VI VEC I LEDEDY INCTDUCT ATTABLEY TO DO	Mine of ient with a 2 dineal openit denote

I AGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.

Twill surrender Do, Hert, 12 60183 and

1) 694 Biltmore Do, Hert, 12 60183 and

2) 1814 N. Lotus Chicago, 12 60639

I wish to retain

700 N. Mayfield Chicago, 12 60644